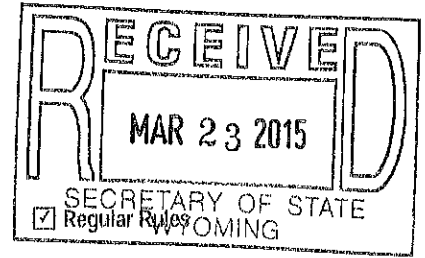




**Certification Page  
Regular and Emergency Rules**  
Revised May 2014



Emergency Rules (After completing all of Sections 1 and 2, proceed to Section 5 below)

**1. General Information**

a. Agency/Board Name Department of Environmental Quality		
b. Agency/Board Address 122 W 25th St	c. City Cheyenne	d. Zip Code 82002
e. Name of Contact Person William Tillman	f. Contact Telephone Number 307-777-6941	
g. Contact Email Address william.tillman@wyo.gov	h. Adoption Date January 14, 2015	
i. Program Water Quality		

**2. Rule Type and Information:** For each chapter listed, indicate if the rule is New, Amended, or Repealed.

If "New," provide the Enrolled Act numbers and years enacted:

Chapter Number:	Chapter Name:	<input type="checkbox"/> New	<input checked="" type="checkbox"/> Amended	<input type="checkbox"/> Repealed
11	DESIGN AND CONSTRUCTION STANDARDS FOR SEWERAGE SYSTEMS, TREATMENT WORKS, DISPOSAL SYSTEMS OR OTHER FACILITIES CAPABLE OF GAINING OR CONTRIBUTING TO POLLUTION AND MOBILE HOME PARK AND CAMPING AREA SEWERAGE AND DISINFECTED SLUDGY DETENTION SYSTEMS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
21	STANDARDS FOR THE REUSE OF TREATED WASTEWATER	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

d.  The Statement of Reasons is attached to this certification.

e. If applicable, describe the emergency which requires promulgation of these rules without providing notice or an opportunity for a public hearing:

**STATE OF WYOMING**  
Office of the Secretary  
Filed the 23rd day of MARCH  
2015 at 2:37 P.M.  
Doc ID # 9762 #1687  
Max Maxfield  
Secretary of State

**3. State Government Notice of Intended Rulemaking**

a. Date on which the Notice of Intent containing all of the information required by W.S. 16-3-103(a) was filed with the Secretary of State: **November 13, 2014**

b. Date on which the Notice of Intent and proposed rules in strike and underscore format and a clean copy were provided to the Legislative Service Office: **November 13, 2014**

c. Date on which the Notice of Intent and proposed rules in strike and underscore format and a clean copy were provided to the Attorney General: **November 13, 2014**

**4. Public Notice of Intended Rulemaking**

a. Notice was mailed 45 days in advance to all persons who made a timely request for advance notice.  Yes  No  N/A

b. A public hearing was held on the proposed rules.  Yes  No

if "Yes:"	Date: <b>January 14, 2015</b>	Time: <b>2:15 pm</b>	City: <b>Cheyenne, WY</b>	Location: <b>Wyoming State Library</b>
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**5. Final Filing of Rules**


a. Date on which the Certification Page with original signatures and final rules were sent to the Attorney General's Office for the Governor's signature: **January 15, 2015**

b. Date on which final rules were sent to the Legislative Service Office: **January 15, 2015**

c. Date on which a PDF of the final rules was electronically sent to the Secretary of State: **January 15, 2015**

**6. Agency/Board Certification**

The undersigned certifies that the foregoing information is correct.

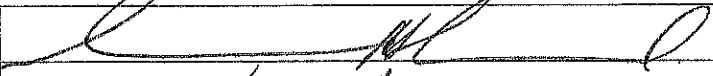
Signature of Authorized Individual (Blue ink as per Rules on Rules, Section 2)	
Printed Name of Signatory	<b>Todd Parfitt</b>
Signatory Title	<b>Director</b>
Date of Signature	<b>January 15, 2015</b>

**7. Governor's Certification**

I have reviewed these rules and determined that they:

1. Are within the scope of the statutory authority delegated to the adopting agency;
2. Appear to be within the scope of the legislative purpose of the statutory authority; and, if emergency rules,
3. Are necessary and that I concur in the finding that they are an emergency.

Therefore, I approve the same.

Governor's Signature	
Date of Signature	<b>3/23/15</b>

**Attorney General:** 1. Statement of Reasons; 2. Original Certification Page; 3. Summary of Comments (regular rules); 4. Hard copy of rules: clean and strike/underscore; and 5. Memo to Governor documenting emergency (for emergency rules only).

**LSO:** 1. Statement of Reasons; 2. Copy of Certification Page; 3. Summary of Comments (regular rules); 4. Hard copy of rules: clean and strike/underscore; 5. Electronic copy of rules (PDFs) emailed to [Criss.Carlson@wyoleg.gov](mailto:Criss.Carlson@wyoleg.gov); clean and strike/underscore; and 6. Memo to Governor documenting emergency (for emergency rules only).

**SOS:** 1. PDF of clean copy of rules; and 2. Hard copy of Certification Page as delivered by the AG.